## Sur University College





## ADMINISTRATIVE & FINACIAL AFFAIRS - Human Resources Office LEAVE APPLICATION FORM

A. This Section to be completed by the Employee
Full Name: Job Title
Department:
Type of Leave: Annual Hajj Emergency Others
Paid Unpaid: Duration: Days or Hours
From:/ to/Ticket Booking Required: (attach list names, Date of Birth of passengers and destinations)
Address & Telephone Number during Leave:
Date://_ Signature:
B. This Section to be completed by the relevant of Head of Department
I recommend / do not recommend the approval of the Leave. (Dates as appropriate)
If approval is recommended is relief required YES/NO. (Delete as appropriate)
Full name (s) of the relief (s):
Date://_ Signature:
C. This Section to be completed by Human Resource Office
Date of Joining:/ Date of return from last leave://
Leave due at the commencement of leave:
Passenger entitlement under contract:Checked validity of VISA/ Passport
Booked to Travel on: Date: Flight: Sector:
Date:/ HR Manager Signature:
D. This Section to be completed by Senior Manager of Administrative and Financial Affairs
Leave Approved / Not Approved. (Delete as appropriate)
Leave to be en-cashed: Day(s) Leave to be carried forward: day(s)
Excess ticket fair if any: (Excess ticket fair to be paid by the employee before booking finalized)
Date://_ Signature:
E. This section to be completed by the Dean if leave is more than Five days and the employee is an academic member. Otherwise, to be completed by Senior Manager of admin. & Fin. Affairs.
C Leave Approved C Leave Not Approved.
Dota' / /